Bernalillo County Environmental Health 111 Union Square SE, Suite 300 Albuquerque, NM 87102 Phone 314-0310 Fax 314-0470



INDIVIDUAL WELL APPLICATION

Permit Number:	
Receipt No.	
Fee.	
Application Complete? Yes	No 🗆
Reviewed By Initials	
Date:	

MAILING ADDRESS CITY STATE ZIP SITE ADDRESS LOT SIZE: LEGAL DESCRIPTION PLAT OR SUBDIVISION DATE COMMERCIAL RESIDENTIAL MOBILE HOME UPC ZONE ATLAS PAGE: INSTALLER MAILING ADDRESS CITY ZIP INSTALLER MAILING ADDRESS CITY ZIP NMSEO LICENSE # APPLICATION IS FOR: NEW WELL TO BE USED FOR DRINKING RIRIGATION REPLACEMENT WELL PERMIT # FOR EXISTING WELL: UIST HORSE WELL BE SHARED? YES NO DEFINITION SISTEMATE WITH SWELL BE SHARED? SISTEMATION (atlach a list if necessary) WELL CONSTUCTION WELL CONSTUCTION COMPLETION DEPTH: CASING LENGTHI ABOVE GROUND: WELL CONSTUCTION WELL ADDITIONAL CONTAMINATION SOURCES (EXPLAIN, USE ADDITIONAL SHEET IF NECESSARY) FLOOD POTENTIAL YES NO DESIGNATION:	OWNER		PHONE:		FAX:		
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DESIGNATION:		I ELOOD POLENTIAL VES NO					
	DESIGNATI			DESIGNATION:	ATION:		
Provide a detailed site plan to scale on a separate sheet of paper. Include location of the well and setback distances to wastewater systems or holding tank, any other possible sources of contamination, existing wells, waterlines, arroyos, or canals, and property lines.				ack distances to wastewa	iter systems or hold	ing tank, any other	
The foregoing information and the site plan provided are true and correct to the best of my knowledge. I understand the issuing of this permit does not relieve me from	The foregoing information and the site of	lan provided are true and correct to the best	t of my knowledge	e. I understand the issuin	g of this permit doe	es not relieve me from	
the responsibility of complying with all regulations. Obtaining the permit does not relieve me from the responsibility of obtaining any permits required by State, County, or City regulations or ordinances or other requirements of State and Federal law. This application expires six months from the application date. A six-month	the responsibility of complying with all r	regulations. Obtaining the permit does not	relieve me from th	ne responsibility of obtain	ing any permits red	quired by State,	
extension may be granted when a written request is submitted prior to the expiration date.				ation expires SIX IIIOIIIIIS	nom me appheano	ii date. A SIX-IIIOIIIII	
□ INSTALLER			SIGNATURE		D	ATE	

Bernalillo County Environmental Health



NDIVIDUAL	WELL	APPL	ICATI	ON
ermit Number:				

Page 2 for DEPARTMENT USE ONLY					
IT APPEARS THAT FROM	THE INFORMATION PROVIDED ON	PAGE 1, THE PF	ROPOSED SYSTEM:	□ I	MEET BERNALILLO COUNTY NDIVIDUAL WATER SYSTEM ORDINANCE 87-30
A PERMIT FOR CONSTRUCTION OF THE WELL DESCRIBED ON PAGE 1 HAS BE			BEEN:	GRANTED W/ GRANTED W/ DENIED	CONDITIONS
COMMENTS:					
	ENVIRONMENTAL HEAL	TH REPRESENT	ATIVE		DATE
			, <u>-</u>		2,112
TYPE OF INODESTION	MANE	DATE	TVDE OF INODEOTION	T	
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SETBACK DISTANCE TO S			_		
SETBACK DISTANCE TO PROPERTY LINE:					
CASING LENGTH ABOVE GROUND:					
SETBACK DISTANCE TO ABSORPTION FIELD:					
COMMENTS:					
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			_		
An onsite survey has been conducted and the onsite liquid waste disposal system described herein has been built in accordance to the plans and/or approved modifications to the plans submitted.					
	ENVIRONMENTAL HEALTH RE	EPRESENTATIVE			DATE